			PART B	- FEE(S) TRAN	ISM	IITTAL		NO. EV93484	7965US		
Complete and se	JUL 3 0 2008	her w	ith applicable		P.O Ale	il Stop ISSUE mmissioner for D. Box 1450 xandria, Virgi 1)-273-2885					
INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	form should be used correspondence including debt of the correspondence including the control of the correspondence of the correspon	or trange the nerwise	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and PUBLIC ders and notification) specifying a new co	ATI of n	ON FEE (if requinantenance fees who pondence address;			nould be completed when correspondence address a rate "FEE ADDRESS" for		
CURRENT CORRESPOND 500	any change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.									
SEED INTELI 701 FIFTH AVE SUITE 5400	Y LAW GRO	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.									
SEATTLE, WA 98104 08/04/2008 RMEBRAH1 00000042 10671070						**VIA EXPRESS MAIL** (Depositor's					
01 FC:2501 720.00 GP 02 FC:1504 300.00 GP 03 FC:8001 9.00 GP					(Sign						
APPLICATION NO.	FILING DATE	FILING DATE			TOR		ATTOR	NEY DOCKET NO.	CONFIRMATION NO.		
10/671,070 TITLE OF INVENTION	09/24/2003 : PYRIMIDINES AND	USES '	THEREOF	Rama Bhatt				200144.404	5866		
APPLN. TYPE	SMALL ENTITY	IS	SUE FEE DUE	PUBLICATION FEE	UE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	YES		\$720	\$300		\$0		\$1020	07/30/2008		
EXAM	INER		ART UNIT	CLASS-SUBCLASS	3						
RAO, DE	EEPAK R		1624	514-275000							
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME A	ND RESIDENCE DAT	A TO E	BE PRINTED ON T	THE PATENT (print of	or typ	pe)					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.											
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								KY)			
CELL THERA	APEUTICS, INC.	•		SEATTLE,					_		
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government											
4a. The following fee(s) are submitted: Solution See Publication Fee (No small entity discount permitted) Advance Order - # of Copies				 Ib. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 							
	s SMALL ENTITY stat	us. See	37 CFR 1.27.			 		ITY status. See 37 C	FR 1.27(g)(2). ne assignee or other party		
interest as shown by the	records of the United St	ates Pa	tent and Trademark	Office.							
Authorized Signature			Date	July	30,2008 32,629						
Typed or printed nam	•										
submitting the complete	d application form to the ions for reducing this but irginia 22313-1450. Do	e USP irden, s O NOT	thould be sent to the SEND FEES OR	e Chief Information (COMPLETED FORM	office IS To	or, U.S. Patent and THIS ADDRESS	Tradem S. SEND	ark Office, U.S. Dep. TO: Commissioner	by the USPTO to proces g gathering, preparing, an ne you require to comple artment of Commerce, P.6 for Patents, P.O. Box 145 number.		

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

<i>₹</i> 		PART B	- FEE(S) TRAN	ISM	IITTAL					
Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE										
	,	4 3 \	P.O. Box 1450							
	()/	الم عن الم	or Fax	Ale: (571	kandria, Virgi: l)-273-2885	nia 22	2313-1450			
NSTRUCTIONS: This	_	<i>[-</i>]		•	•	red). B	locks 1 through 5 sho	ould be completed where		
ppropriate. All further c	orrespondence included to below or directed other	g the Patent advance or	ders and notification) specifying a new of	of m	aintenance fees woondence address;	ill be n and/or	nailed to the current c (b) indicating a separa	ould be completed where orrespondence address as ate "FEE ADDRESS" for		
naintenance tee nouticau	ons.			Note	: A certificate of i	mailing	can only be used for	domestic mailings of the		
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.										
		2008 ERTY LAW GRO	IID DI I C	I her	Cert	tificate	of Mailing or Transm	ission		
701 FIFTH AVE SUITE 5400		MII LAW GRO	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.							
SEATTLE, WA		*	*VIA EXPRE	(Depositor's name)						
								(Signature)		
								(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVE			ATTO	RNEY DOCKET NO.	CONFIRMATION NO.		
10/671,070	09/24/2003		Rama Bhatt	200144.404 5866						
TILE OF INVENTION:	PYRIMIDINES AND	USES THEREOF								
·			·							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	UE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	YES	\$720	\$300		\$0		\$1020	07/30/2008		
EXAMI	EXAMINER ART UNIT			3						
RAO, DE	EPAK R	1624	514-275000							
. Change of corresponde CFR 1.363).	nce address or indicatio	n of "Fee Address" (37		on the patent front page, list						
Change of corresponded Address form PTO/SB	or agents OR, alte									
"Fee Address" indi	cation (or "Fee Address	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to								
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 2 registered patent attorneys or agents. If no name is listed, no name will be printed.										
		A TO BE PRINTED ON								
PLEASE NOTE: Unle	ess an assignee is ident in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the data w	the p	atent. If an assign assignment.	ee is io	lentified below, the do	cument has been filed for		
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed frecordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
CELL THERAPEUTICS, INC. SEATTLE, WA										
Please check the appropri	ate assignee category of	r categories (will not be pr	rinted on the patent):		Individual 🛭 C	orporat	on or other private gro	up entity Government		
ia. The following fee(s) a	are submitted:	4 '	h Payment of Fee(s):	Ples	se first reannly a	nv nrev	viously paid issue fee s	hown above)		
Issue Fee	are submitted.	40	A check is enclo	•	.se mserenpe, a	ny pro-	lously pare issue is	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
 ☑ Publication Fee (No small entity discount permitted) ☑ Payment by credit card. Form PTO-2038 is attached. ☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number: 19-1090 (enclose an extra copy of this form) 										
Advance Order - #	of Copies		overpayment, to	Depo	sit Account Numb	rge the er: 19	-1090 (enclose ar	n extra copy of this form).		
5. Change in Entity Stat	tus (from status indicate s SMALL ENTITY stat	•	b. Applicant is n	o lon	ger claiming SMA	LL EN	TITY status. See 37 CF	FR 1.27(g)(2).		
NOTE: The Issue Fee and	d Publication Fee (if records of the United St	uired) will not be accepte	ed from anyone other	than	the applicant; a reg	istered	attorney or agent; or th	e assignee or other party in		
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in the interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Date Date										
Authorized Signature Color of Sharkey, Ph.D. Date Tuly 30, 2008 Typed or printed name Richard G. Sharkey, Ph.D. Registration No. 32, 62.9										
This collection of inform	ation is required by 37	CFR 1.311. The informati	on is required to obtain	n or	retain a benefit by	the pub	lic which is to file (and	by the USPTO to process)		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.